Juvenile Referral Report

OBTS Number | 2. N.T.A. | 4. Request for Capias | 1 | N

ADMINISTRATIVE

Agency ORI Number: FLO 500000
Agency Name: PALM BEACH COUNTY SHERIFF'S OFFICE
Agency Report Number (N.T.A.'s only): 06- 18-116885

ChargeType: Check as many as apply. ☐ 1. Felony ☐ 2. Traffic Felony ☐ 3. Misdemeanor ☒ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other
Weapon Seized / Type: 2 | 1. Yes 2. No NONE
Multiple Clearance Indicator: 01

Location of Arrest (Including Name of Business): OKEECHOBEE BLVD/N STATE ROAD 7 RPB, FL 33411
Location of Offense (Business Name, Address): OKEECHOBEE BLVD / N STATE RD 7 RPB

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
09/04/2018	23:05					ALL FLORIDA TOWING

DEFENDANT

Name (Last, First, Middle): RYAN, SEAN, PATRICK
Alias (Name, DOB, Soc. Sec. #, Etc.)

Race	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W - White I - American Indian B - Black O- Oriental/Asian: W	M	10/31/1991	5'09	165	BLUE	BLUE	MED	AVG

Scars, Marks, Tatoos, Unique Physcal Features (Location, Type, Description)
Marital Status: Single | Religion: NONE
Indication of: Alcohol Influence [Y] [N] [Unk.] / Drug Influence [Y] [N] [Unk.]

Local Address (Street, Apt. Number): 11255 47th ROAD NORTH | (City): LOXAHATCHEE, FL | (State) | (Zip): 33412
Phone: (561) 798-0515
Residence Type: 1. City 2. County 3. Florida 4. Out of State: 2

Permanent Address (Street, Apt. Number) | (City) | (State) | (Zip)
Phone: ( )
Address Source: VERBAL

Business Address (Name, Street) | (City) | (State) | (Zip)
Phone: ( )
Occupation: YACHT SERVICING

D/L Number, State: R500-795-91-391-0; FLORIDA
Soc. Sec. Number: [redacted]
INS Number
Place of Birth (City, State): FT. LAUD, FLORIDA
Citizenship: US

CO-DEF

Co-Defendant Name (Last, First, Middle) | Race | Sex | Date of Birth | ☐ 1. Arrested ☐ 2. At Large | ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile
Co-Defendant Name (Last, First, Middle) | Race | Sex | Date of Birth | ☐ 1. Arrested ☐ 2. At Large | ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile

JUVENILE

☐ Parent ☐ Legal Custodian ☐ Other:
Residence Phone: ( )
Address (Street, Apt. Number) | (City) | (State) | (Zip)
Business Phone: ( )

Notified by: (Name) | Date | Time | Juvenile Disposition 1. Handled/ processed within Dept. and Released. 2. TOT HRS / DYS 3. Incarcerated

Released To: (Name) | Relationship | Date | Time

The above address provided by ☐ defendant and / or ☐ defendant's parents The child and / or parent was told to keep the Juvenile Court Clerk (Phone 355-2526) informed of any change of address.
☐ Yes, by: (Name) ☐ No: (Reason)
School Attended | Grade

Property Crime? ☐ Yes ☐ No | Description of Property | Value of Property

CODE

Drug Activity: N. N/A P. Possess S. Sell B. Buy T. Traffic R. Smuggle D. Deliver E. Use K. Dispense/ Distribute M. Manufacture/ Produce/ Cultivate Z. Other
Drug Type: N. N/A A. Amphetamine B. Barbiturate C. Cocaine E. Heroin H. Hallucinogen M. Marijuana O. Opium/Deriv. P. Paraphernalia/ Equipment S. Synthetics U. Unknown Z. Other

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
DRIVING UNDER THE INFLUENCE	1	☐Y ☐N	316.193(1)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant I Capias Number	Bond
N	N	NONE	18-116885		OR

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐Y ☐N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐Y ☐N		

Drug Activity	Drug Type	Amount I Unit	Offense #	Warrant / Capias Number	Bond

Received WB
SEP 06 2018

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐Y ☐N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond

NOTICE TO APPEAR

Location (Court, Room Number, Address)
CRIMINAL JUSTICE COMPLEX / 3228 GUN CLUB ROAD, WPB, FL 33406

Court Date and Time: Month OCTOBER Day 4th Year 2018 Time 08:30 AM X PM

I AGREE TO APPEAR AT THE TIME AND PLACE DESIGNATED TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE SUBSCRIBED. I UNDERSTAND THAT SHOULD I WILLFULLY FAIL TO APPEAR BEFORE THE COURT AS REQUIRED BY THIS NOTICE TO APPEAR, THAT I MAY BE HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED

Signature of Defendant (or Juvenile and Parent /Custodian)
Date Signed: 09/04/2018

ADMIN

HOLD for other Agency Name:
☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other:
Intake Deputy | ID # | Pouch #

Signature of Arresting Officer: X Inv. Schaefer #8777
Name of Arresting Officer (Print): INV. J. SCHAEFER | I.D. #: 8777
Transporting Officer: INV. J. SCHAEFER | ID #: 8777 | Agency: PBSO

Name Verification (Printed by Arrestee) (PRINT): Sean Ryan
Witness here if subject signed with an -X-

PAGE 1 OF 1

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PBSO 8148 REV. 8/97

2018 SEP 07 7:11

2018CT015931

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PROBABLE CAUSE AFFIDAVIT

1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias | 1 | Juvenile | N

ADMIN

OBTS Number

Agency ORI Number: FLO 500000

Agency Name: PALM BEACH COUNTY SHERIFF'S OFFICE

Agency Report Number: 06-~~18-116818~~ 18-116885

Special Notes:

Charge Type: Check as many as apply. [ ] 1. Felony [ ] 2. Traffic Felony [x] 3. Misdemeanor [ ] 4. Traffic Misdemeanor [ ] 5. Ordinance [ ] 6. Other

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
Ryan, Sean, Patrick		W	M	10/31/1991

CHARGES

Charge Description: DUI

Charge Description:

Charge Description:

Charge Description:

VICTIM

Victim's Name (Last, First, Middle)	Race	Sex	Date of Birth
State of Florida, ,			

Local Address (Street, Apt. Number) (City) (State) (zip) Phone ( ) Address Source

,

Business Address (Name, Street) (City) (State) (zip) Phone ( ) Occupation

PROBABLE CAUSE STATEMENT

The undersigned certifies and swears that he/she has just and reasonable grounds to believe, and does believe that the above named Defendant committed the following violation of law.

The Person taken into custody

- [ ] committed the below acts in my presence.
- [ ] confessed to _____ admitting to the below facts.
- [ ] was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.
- [x] was found to have commited the below acts, resulting from my (described) investigation.

On the 4 day of September 2018 at 11:08 [ ] A.M. [x] P.M. (Specifically include facts constituting cause for arrest.)

On 9/4/2018 at 2200 Hrs. I was conducting patrol on State Road 7 in the Village of Royal Palm Beach in an unmarked patrol vehicle. At 2227 Hrs. I observed a black Ford F-150 bearing FL tag MBM679 drive past me at a high rate of speed. The posted speed limit for State Road 7 is 45 MPH. I proceed to pace the vehicle at 90 mph before reaching the intersection of State Road & Okeechobee Blvd.

I activated my emergency lights and conducted a traffic stop. Upon walking up to the truck I observed an open pack of Coors light beer cans sitting in the back seat with several cans visibly missing. I made contact with driver Sean Patrick Ryan by FL DL. Computer checks revealed that Sean's DL was valid. While speaking with Sean I smelled a strong odor of alcohol coming from the vehicle along with Sean's speech being slurred. Sean's eyes were visibly bloodshot. I asked Sean why he was driving so fast and he stated that "he really didn't know the area" I proceeded to ask Sean for his Driver's License, vehicle registration and insurance. Sean began to reach for his wallet in his back pocket and was very slow in his movements handing me his credit card instead of his driver's license.

Based on my findings I proceeded to call DUI Investigator Schaffer where the case was transferred to him.

This is for supplemental purposes only

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ADMINISTRATIVE

STATE OF FLORIDA
COUNTY OF PALM BEACH

D/S C.Tiburcio #19480
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 4 day of Septmeber 2018 by D/S C.Tiburcio

(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced DEPT ID

INV. SCHAFFER #8777 Inv. Schaffer #8777
Notary Public, Clerk of Court, Officer (F.S.S. 117.10)

PAGE 1 OF 1

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PBSO #0004 REV. 04/01

ON THE 4th DAY OF SEPTEMBER 20 18, AT 22:27 AM ✓ PM

SUBJECT: RYAN, SEAN, PATRICK CASE NUMBER: 18-116885

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: INV. J. SCHAEFER

PERSONAL CONTACT

DRIVING PATTERN: ACTUAL PHYSICAL CONTROL (PHYSICAL EVIDENCE OR STATEMENTS PUTTING DEF. BEHIND WHEEL OF VEHICLE)

On 09/04/2018 at approximately 22:35hrs, I was called to the scene of a traffic stop at 9951 Okeechobee Blvd, which is located in the City of West Palm Beach, Palm Beach County, Florida. I arrived at the scene at approximately 22:40hrs. D/S Christian Tiburcio #19480 relayed to me, and completed a written signed sworn supplemental Probable Cause Affidavit, that he had stopped the defendant's vehicle, a black 2010 Ford F-150 bearing FL tag MBM-679, because the defendant was speeding, doing 90/45mph. D/S Tiburcio noticed that the defendant had articulable indicators of impairment, so he called for a DUI unit to conduct a possible DUI investigation. D/S Tiburcio identified the defendant, to me, as the driver and sole occupant of the vehicle, at the time of the stop.

OBSERVATION OF DRIVER:

Upon making contact with the driver who was identified by his Florida driver license as "SEAN PATRICK RYAN", I immediately detected an obvious and strong odor of an unknown alcoholic beverage emitting from his person and face area. This odor intensified as I spoke to Ryan. Ryan had glassy, glazed, and blood shot eyes. Ryan's speech was slurred, slow, thick, and at times difficult to understand. Ryan's movements were slow, deliberate, and lethargic with poor coordination. Ryan had an unsteady gate while walking to my patrol vehicle and had extreme difficulties following directions given to him. Ryan was wearing a gray long sleeve shirt, gray camo shorts, and black sneakers. All the clothing appeared neat.

DRIVER'S STATEMENTS:

Pre-Miranda: Ryan stated he had only a couple of beers earlier in the day. There was an open 12 pack with 2 beers remaining, which were still cold to the touch and were "sweating".

Ryan consented to breath after Implied Consent was read to him, which he stated he understood. Ryan refused to participate in the Q&A portion of the interview.

ODORS:

A strong and obvious odor of an unknown alcoholic beverage was emitting from his person and face area which intensified as I spoke to Ryan.

GENERAL OBSERVATIONS

SPEECH: **Ryan 's speech was slurred, slow, and thick, and at times difficult to understand.**

ATTITUDE: **indifferent, annoyed, argumentative, belligerent, disrespectful, insulting**

CLOTHING: **gray long sleeve shirt, gray camo shorts, and black sneakers**

MEDICAL/OTHER: **anxiety / high blood pressure**

TATE OF FLORIDA
OUNTY OF PALM BEACH

INV. J. SCHAEFER Inv. Schaefer #8777
ignature of Arresting/Investigative Officer)

he foregoing instrument was sworn to or affirmed and subscribed before me this 4th day of SEPTEMBER 20 18 by INV. J. SCHAEFER

rint name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced PERSONALLY KNOWN LEO

Sue Owen (#3184)
otary Public, Clerk of Court, Officer (F.S.S 117.10)

BEVERLY SUE OWEN
MY COMMISSION # GG 188278
EXPIRES: May 30, 2022
Bonded Thru Notary Public Underwriters

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SUBJECT: RYAN, SEAN, CASE NUMBER 18-116885

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

- [x] LT EYE-LACK OF SMOOTH PURSUIT
- [x] RT EYE-LACK OF SMOOTH PURSUIT
- [x] LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION
- [x] RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION
- [x] LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES
- [x] RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES

Other Observations:

Ryan would sway roughly in a side to side front to back pattern throughout the task. Ryan did not touch the tip of the pen as directed to positively identify the point to be tracked. Ryan was reminded numerous times to track the pen with his eyes only. Ryan failed to keep his head still while tracking the stimulus. I had Ryan hold his chin with his left hand and his left elbow with his right hand to further stabilize his head. Ryan would stroke his beard while holding it becase he thought that was what I told him to do. Ryan had both VGN and LOC.

WALK & TURN:

I explained and demonstrated the instructions for the "Walk & Turn" to Ryan who stated the he understood. During the task, I observed Ryan to sway roughly in a side to side, front to back pattern throughout the demonstration phase. Ryan could not maintain his balance while listening to instructions. Ryan stepped out of the instructional stance during the demonstration to catch his balance. Ryan would take pauses between steps to steady himself and to regain balance. Ryan missed heel-to-toe steps and stepped off the line. Ryan used his arms for balance by raising them more than six inches. Ryan performed an improper turn by turning other than which was demonstrated. Additionally, Ryan performed the incorrect number of steps.

ONE LEG STAND:

I explained and demonstrated the instructions for the "One Leg Stand" to Ryan who stated that he understood. During the task, I observed Ryan to sway roughly in a side to side, front to back pattern throughout the demonstration phase. Ryan continued to sway while balancing on one leg. Ryan used his arms to balance raising them more than 6 inches from his sides. Ryan failed to count properly by thousands as instructed.

FINGER TO NOSE:

I explained and demonstrated the instructions for the "Finger to Nose" task to Ryan who stated that he understood. During the task, I observed Ryan to sway roughly in a side to side, front to back pattern throughout the demonstration phase. Ryan failed to return his arms down to his sides as instructed after touching his nose. Ryan's index finger did not touch the tip of the nose on 4 of 6 attempts, touch under on L1, R1, R2, and R3. Ryan searched for the tip of his nose using the finger to find their nose prior to touching the tip. The sequence used for this task was L, R, L, R, R, L.

ROMBERG ALPHABET:

I explained and demonstrated the instructions for the "Rhomberg Alphabet" task to Ryan who stated that he understood. Ryan stated he did not me to recite the alphabet during the demonstration because he didn't "need the answers" to the task. During the task, I observed Ryan to sway roughly in a side to side, front to back pattern throughout the demonstration phase. Ryan would sway more than 2 inches. Ryan incorrectly recited the alphabet and could not get past "T".

BREATH TEST RESULTS: 1) .259 | 2) .246 | 3) | 4)

STATE OF FLORIDA
COUNTY OF PALM BEACH

INV. J. SCHAEFER Inv. Jschaefer #8777
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 4th day of SEPTEMBER 2018 by INV. J. SCHAEFER

(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced PERSONALLY KNOWN LEO

Sue Owen (#3184)
(Notary Public, Clerk of Court, Officer (F.S.S. 117.10)

BEVERLY SUE OWEN
MY COMMISSION # GG 188278
EXPIRES: May 30, 2022
Bonded Thru Notary Public Underwriters

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WITNESS LIST

CASE NUMBER: 18-116885

ARRESTING OFFICER: INV. J. SCHAEFER

ADDRESS: 3228 GUN CLUB ROAD WEST PALM BEACH, FL 33406

PHONE NUMBERS (HOME): _____ (WORK) (561) 688-4001

CAN TESTIFY TO: SEE DUI PROBABLE CAUSE AFFIDAVIT, OFFENSE REPORT, and IN-CAR VIDEO

NAME: D/S CHRISTIAN TIBURCIO #19480 (DISTRCT 9)

ADDRESS: 3228 GUN CLUB ROAD WEST PALM BEACH, FL 33406

PHONE NUMBERS (HOME) _____ (WORK) (561) 688-3000

CAN TESTIFY TO: SEE SUPPLEMENTAL PROBABLE CAUSE AFFDAVIT

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) 0 (WORK) 0

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

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PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

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[illegible] BREATH ALCOHOL TEST REPORT

AGENCY: PBSO

SUBJECT: Ryan, Sean Patrick CASE NUMBER: 18-116885

DATE: 09/04/18 - 09/05/18 ~~VIDEO TAPE NUMBER:~~ N/A

BEGINNING TIME: 2355 ENDING TIME: 0008

BREATH TESTS RESULTS: 1) .259 TIME 0002 (A.M.) ~~P.M.~~ 2) .246 TIME 0005 (A.M.) ~~P.M.~~

3) ~~TIME~~ ~~A.M./P.M.~~ 4) ~~TIME~~ ~~A.M./P.M.~~

BREATH OPERATOR: S. Owen #3184

MAINTENANCE TECHNICIAN: J. Karlecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH:

ATTITUDE: Talkative, sarcastic, disrespectful

CLOTHING: black Tennis shoes, Camo flage pants grey top

MEDICAL CONDITIONS: anxiety, high blood pressure, depression

MEDICATIONS: anti depressant (alprazolam (Xanax) ex sleepor

OTHER: blood pressure meds NOT today usually take at night time D went to bathroom during observation 2640A

COMMENTS: A/o & D arrived at 2335 hrs
A/o observed 20 minutes
A/o requested breath test, D refused
A/o read I/C, D understood D agreed
No problem with test, D kept talking.
Tech explain results
A/o read c/w. Refused Q & A

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SUBJECT: Ryan, Sean Patrick CASE NUMBER: 18-116885

IMPLIED CONSENT FOR DUI IN A MOTOR VEHICLE

NOTE: READ ONLY THE PARAGRAPH APPLICABLE TO THE TYPE OF TEST YOU ARE REQUESTING.

I am now requesting that you submit to a lawful test of your BREATH for the purpose of determining its alcohol content.

-OR-

I am now requesting that you submit to a lawful test of your URINE for the purpose of detecting the presence of chemical or controlled substances.

-OR-

I am now requesting that you submit to a lawful test of your BLOOD for the purpose of detecting its alcohol content and the presence of chemical or controlled substances.

NOTE: READ ONLY IF THE SUBJECT DOES NOT COMPLY WITH YOUR REQUEST.

I am Inv. Schaefer of the PBSO.

If you fail to submit to the test I have requested of you, your privilege to operate a motor vehicle will be suspended for a period of one (1) year for a first refusal, or eighteen (18) months if your privilege has been previously suspended as a result of a refusal to submit to a lawful test of your breath, urine or blood. Additionally, if you refuse to submit to the test I have requested of you and if your driving privilege has been previously suspended for a prior refusal to submit to a lawful test of your breath, urine or blood, you will be committing a misdemeanor. Refusal to submit to the test I have requested of you is admissible into evidence in any criminal proceeding.

SUBJECT'S SIGNATURE: (X) Read on Camera

CONSTITUTIONAL WARNINGS

I AM REQUIRED TO WARN YOU BEFORE YOU MAKE ANY STATEMENTS THAT YOU HAVE THE FOLLOWING RIGHTS:

1. You have the right to remain silent and not answer any questions.
2. Any statement must be freely and voluntarily given.
3. You have the right to the presence of a lawyer of your choice before you make any statement and during any questioning.
4. If you cannot afford a lawyer, you are entitled to the presence of a court appointed lawyer before you make any statements and during any questioning.
5. If at any time during the interview you do not wish to answer any questions, you are privileged to remain silent.
6. I can make no threats or promises to induce you to make a statement. This must be of your own free will.
7. Any statement can and will be used against you in a court of law.

SUSPECT'S SIGNATURE: (X) Read on Camera

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SUBJECT: Kyan, Sean PATrick CASE NUMBER: 18-116885

QUESTIONS AND ANSWERS

I AM NOW GOING TO ASK YOU SOME QUESTIONS. WITH THESE RIGHTS IN MIND, YOU MAY ANSWER SOME OF, ALL OF, OR NONE OF THE FOLLOWING QUESTIONS AS YOU LIKE.

WERE YOU OPERATING A MOTOR VEHICLE AT THE TIME OF THE STOP/ACCIDENT? _____

WHERE WERE YOU GOING? _____

WHAT STREET OR HIGHWAY WERE YOU ON? _____

DIRECTION OF TRAVEL? _____ WHERE DID YOU START? _____ REFUSED

WHAT TIME DID YOU START? _____ WHAT TIME IS IT NOW? _____

WHAT IS TODAY'S DATE? _____ WHAT DAY OF THE WEEK IS IT? _____

WHAT COUNTY AND CITY ARE YOU IN NOW? _____

WHEN DID YOU LAST EAT? _____ WHAT DID YOU EAT? _____

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? _____

HOW MUCH DO YOU WEIGH? _____ HAVE YOU BEEN DRINKING? _____ WHAT? _____

HOW MUCH? _____ WHERE? _____ WITH WHOM? _____

WHEN DID YOU HAVE YOUR FIRST DRINK? _____ AND YOUR LAST DRINK? _____

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? _____

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? _____ ARE YOU UNDER THE INFLUENCE? _____

HAVE YOU CONSUMED ANY ALCOHOL SINCE THE ACCIDENT? _____ HOW MUCH? _____ REFUSED

WHAT? _____ WHERE? _____ WHEN? _____

WHAT LINE OF WORK ARE YOU IN? _____ WHEN DID YOU LAST WORK? _____

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? _____ WHAT? _____

ARE YOU SICK OR INJURED? _____ WHAT'S WRONG? _____

DO YOU LIMP? _____ DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? _____

WERE YOU IN AN ACCIDENT TODAY? _____

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? _____ WHEN? _____

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? _____ WHO? _____ WHY? _____

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? _____ WHAT? _____ WHEN? _____

DO YOU HAVE: REFUSED

EPILEPSY? _____
GLASS EYE? _____
FALSE TEETH? _____
EAR INFECTION? _____
INNER EAR TROUBLE? _____
DIABETES? _____

DO YOU HAVE ANY PROBLEMS WITH YOUR EYES THAT ARE NOT CORRECTED BY GLASSES? _____

DO YOU TAKE INSULIN? _____ IF SO, WHEN WAS YOUR LAST INJECTION? _____

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? _____ WHERE? _____

INTERVIEWER: _____

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PALM BEACH COUNTY
SHERIFF'S OFFICE
Florida State Statute Exemption Sheet

Palm Beach County Sheriff's Office – Arrests Only

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	☐	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	☐	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	☐	119.071(4)(c)	Undercover personnel.	
	☐	119.071(2)(f)	Confidential informants (CIs).	
	☐	119.071(2)(e)	Confession.	
Public Info. Exemptions	☐	985.04(1)	Juvenile offender records.	
	☐	119.071(h)(i)	Assets of a crime victim.	
	☐	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	☐	394.4615(7)	Mental health information.	
	☐	119.071(4)(d)(2)(a)	Home address, telephone, Social Security number, date of birth, or photos of active/former LE personnel, spouses, and children.	
Florida Rules of Judicial Administration 2.420 (Rule of 23)	☒	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	☐	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	☐	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	☐	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	☐			
	☐			
	☐			
	☐			
	☐			
Other	☐		Other:	
	☐		Other:	

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REVIEW COMPLETED BY

Booking Number: 2018029723	**Date:** September 5, 2018
	Specialist Name/ID: L. Rosales, 4489